

**Public Consultation on the Draft Accreditation Standards for the five-year  
fully integrated Masters Degree Programme**

**Submissions and Responses**

*Approved by the PSI Council at its meeting on 12 December 2013*

<b>No.</b>	<b>Name of Individual</b>	<b>In a personal capacity</b>	<b>As an authorised representative of an organisation/body, expressing the views of that organisation/body</b>
1	Amar	In a personal capacity	
2	Ciara O'Mahony	In a personal capacity	
3	Rachel Brady	In a personal capacity	
4	Anne Keane	As an authorised representative	Medical Council
5	Niamh Carey	In a personal capacity	
6	Marie Richardson	In a personal capacity	
7	Aisling Crowley	In a personal capacity	
8	Roisin Gaffney	In a personal capacity	
9	Fiona Keohane	In a personal capacity	
10	Muireann Ni Leidhin	In a personal capacity	
11	Ailbhe Hayes	In a personal capacity	
12	mark mcphillips	In a personal capacity	
13	Mary Hopkins	In a personal capacity	
14	Eileen McCarthy	In a personal capacity	
15	Mary McCarthy	In a personal capacity	
16	Ciara	In a personal capacity	
17	Colm Downes	In a personal capacity	
18	Niamh Callanan	In a personal capacity	
19	Marie McElhone	In a personal capacity	
20	Michael Austin	In a personal capacity	
21	John MacNamara	In a personal capacity	
22	Lani Smith	In a personal capacity	
23	Joanne Philbin	In a personal capacity	
24	MaryKate Shanahan	In a personal capacity	
25	Daphne Keena	In a personal capacity	
26	Paul McNeill	In a personal capacity	
27	Sarah Foley	In a personal capacity	
28	Paul Dillon	In a personal capacity	
29	Elizabeth O'Brien	In a personal capacity	
30	Sarah O'Riordan	In a personal capacity	
31	Li Wah Kyaw Tun	In a personal capacity	
33	Sally Devine	In a personal capacity	
34	Mohamed	In a personal capacity	
35	Nicola Hamill	In a personal capacity	
36	Peter Tierney	In a personal capacity	
37	Jean Lannin	In a personal capacity	
38	Paul Fahey	In a personal capacity	
39	Mary Ryan	In a personal capacity	
41	Richard McLaughlin	In a personal capacity	

42	Colin Burke	In a personal capacity	
43	Revathi Palanisamy	In a personal capacity	
44	Bart Van Oyen	In a personal capacity	
45	Peter J McElwee MPSI	In a personal capacity	
46	Michelle MacEneaney	In a personal capacity	
48	Aoife Fleming	In a personal capacity	
49	Norma Harnedy	In a personal capacity	
50	Prof Stephen Byrne	As an authorised representative	School of Pharmacy UCC
51	Dr Tamasine Grimes	In a personal capacity	
52	Nuala Doyle	As an authorised representative	HPAI
53	Prof Linda Hogan	As an authorised representative	TCD
54	Joan Peppard	As an authorised representative	Hospital Pharmacist Association of Ireland
55	Anne Teresa Morgan	As an authorised representative	Boots Retail Ireland
56	Anne Maria O'Connor	As an authorised representative	Health and Safety Authority
57	Jennifer Gygax	As an authorised representative	HEA

Would you agree that the **draft standards are fit for purpose** and capture all the elements necessary to support the development of a fully integrated five-year pharmacy degree programme?

No	Name	SUBMISSION	PSI RESPONSE
24	Mary Kate Shanahan	Yes, but I think it would be of benefit to advise secondary school students who are contemplating undertaking a pharmacy degree that the integrated course is at least five years.	Noted. The academic institutions must ensure that the factual information provided for the purposes of CAO applications by all students is up-to-date and can inform a student's reasonable expectations as to the programme for which they are applying
49	Norma Harnedy	Yes, excellent guidance for the Schools of Pharmacy. However, I would like to see more guidance on the work placement element of the degree as most of the standard focus on the School and a significant proportion of the student's five years will be outside of the School	Noted. The experiential learning elements of the standards are referenced in Standards 2, 3, 5, 7 and 8. The guidance document to support these standards will provide additional clarity to the providers as to requirements for practice placements.
53	Prof Linda Hogan, as an authorised representative of the School of Pharmacy TCD	We agree that, in general, the draft standards are fit for purpose. Where we feel that consideration should be given to amendment or clarification of particular standards we have indicated such in the comments provided below.	Noted.
54	Joan Peppard, as an authorised representative of the Hospital Pharmacist	It is difficult to comment on the Draft standards in the absence of the detailed guidelines proposed	Noted.

	Association of Ireland		
55	Anne Teresa Morgan, as an authorised representative of Boots Retail Ireland	We would agree that the draft standards broadly capture the elements required in a fully integrated five year programme. There are some improvements that we feel could be made and some points that warrant further clarity, and we have outlined these below. Where sections are left blank this can be taken as agreement for this standard	Noted.

**Do you agree that **Standard 1** provides sufficient guidance to the professional degree programme provider in the design and implementation of a strategy and planning process that will facilitate the successful operation of the five-year fully integrated Masters Degree Programme?**

No	Name	SUBMISSION	PSI RESPONSE
4	Anne Keane, as an authorised representative of the Medical Council	Agree  It is important that the standards are not so overly prescriptive as to stifle educational innovation	Noted. The PSI also notes the comments with respect to the indicative syllabus and the avoidance of overly prescriptive standards.
14	Eileen McCarthy	Neutral  <i>Re Standard 1.5</i> Not quite sure how effective implementation will be. In retail pharmacies I think students will not have an active role, rather they will shadow the pharmacist on duty	Noted. The PSI will monitor the implementation process throughout the first five years of the programme to ensure an effective implementation.
31	Li Wah Kyaw Tun	Strongly Agree  <i>Re Standard 1.1/1.2/1.3/1.4/1.5</i> Agree	Noted.
33	Sally Devine	Agree  <i>Re Standard 1.1 (b)</i> is important  <i>Re Standard 1.2</i> As regard (i) it's important to keep this realistic and not over the top so a student getting a concern against their name for not signing a register for example would be inappropriate	Noted. As a student would have no jurisdiction to sign any registers, this concern should not arise.
44	Bart Van Oyen	Agree	As the Register of Pharmacists is a generalist register, the HEI must be able

		<p><i>Re Standard 1.2</i> Is the register making a difference between, community, hospital and industrial pharmacists? If not, I agree. But why would someone want to engage in patient relations if he/ she wants to be an industrial pharmacist.</p>	to confirm that a graduate is fit to apply to have their names entered in the Register of Pharmacists, irrespective of future practice. Specialisation, as set out in the Pharmacy Act 2007, will occur post-qualification.
49	Norma Harnedy	<p>Agree</p> <p><i>Re Standard 1.2</i> This seems to say that all students are deemed fit for practice unless an incident occurs which highlights they are not fit for practice. Could this be changed so that some kind of assessment is carried out which would probe if students were fit for practice e.g. assessment for TB in high risk students (e.g. coming from endemic areas), or in class discussion of ethical scenarios.</p>	The PSI would be satisfied that this standard, when read in conjunction with standards 2.2, 2.8(b) and 5.4, could not be construed in this narrow a manner.
51	Dr Tamasine Grimes	<p>Agree</p> <p><i>Re Standard 1.1</i> The “mission” does not include a statement of commitment to the development of graduates satisfying the CCF.</p>	Noted. Standard 1.1 has been revised to incorporate this point.
53	Prof Linda Hogan, as an authorised representative of the School of Pharmacy TCD	<p>Agree</p> <p><i>Re Standard 1.1</i> The “mission” does not include a statement of commitment to the development of graduates satisfying the Core Competency Framework for Pharmacists.</p>	Noted. Standard 1.1 has been revised to incorporate this point.
54	Joan Peppard, as an authorised representative of the Hospital Pharmacist Association of Ireland	<p>Neutral</p> <p><i>Re Standard 1.4</i> It is assumed that these KPI's will be outlined in more detail in the proposed supporting guideline</p>	The PSI’s view is that the KPIs associated with a HEI’s strategic plan is a matter for the institution to demonstrate how they comply with these Standards. However, KPIs specifically relating to compliance with these Standards are a requirement under Standard 7.4
55	Anne Teresa Morgan, as an authorised representative of	<p>Agree</p> <p><i>Re Standard 1.1</i></p>	Noted.

	<p>Boots Retail Ireland</p>	<p>Yes agree with the statement; however it would be useful to define the term staff i.e. does the term staff specifically relate solely to employees of school of pharmacy or encompass staff of training establishments for practice placements. Consideration and guidance should be provided by the provider of the implications for the student if they come in contact with poor professional practice when in the practice placement</p> <p><i>Re Standard 1.2</i> Further guidance will be needed on the type and severity of concerns that should be raised in this log, this guidance should be strong enough to capture any major patient safety concerns but does not act as a hindrance to any tutor discussing a concern with the provider e.g. if the policy is too strict or cumbersome a tutor may not wish to raise an issue with punctuality/attendance in a student's 2nd year if it is going to stay on their record for all of the five years.</p> <p><i>Re Standard 1.4</i> Welcome the concept of structured experience of inter-professional working</p>	<p>Standard 3 sets out the various human resources associated with delivery of the Professional Degree Programme (PDP). However, the PSI has revised Standard 1.1 to include a reference to all those contributing to the PDP as follows: 'respects and supports the needs of diverse stakeholders, students, staff and all those contributing to the Professional Degree Programme.' [new Standard 1.1(c)]</p> <p>With regard to support for students in placements, Standard 7.8 makes reference to 'appropriate support for students including processes to monitor, review and take necessary corrective action'. The guidance for HEIS to accompany these Standards will include a reference to this area.</p> <p>Noted. The policies in place by the HEIs to implement this Standard will be reviewed and monitored by the PSI as part of the accreditation process.</p> <p>Noted.</p>
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Do you agree that **Standard 2** provides sufficient guidance to the professional degree programme provider in establishing an effective management structure that embraces a patient-centred, collaborative and progressive approach to learning as is required by the five-year fully integrated Masters Degree Programme?

No	Name	SUBMISSION	PSI RESPONSE
14	Eileen McCarthy	Disagree Too academic orientated, Would be more appropriate if tutors had a more active role in accountability of student etc.	Noted. As this Standard relates to the leadership, organisation and governance at HEI-level, the PSI would be looking to see the detailed arrangements in place by HEIs with placement providers as part of the accreditation process. However, Standard 7.5 has been amended to reflect this comment and now reads as follows: 'There must be a reliable means of reviewing each student's proficiency over the period of the Professional Degree Programme, to include proficiency in practice placements, to provide robust evidence of each student's performance (...)'
24	MaryKate Shanahan	Agree <i>Re Standard 2.1</i> All establishments should have the same final paper or PRE to ensure fairness and this should be prepared by members of faculty from all schools  <i>Re Standard 2.5</i> Industrial, community and hospital placement opportunities should be afforded to all students.	Noted. Standard 6.1(k) provides that there must be a final formal summative OSCE at the end of year five that would meet the requirements of the current PRE. However, as each HEI will have developed its own curriculum, it will be a role of the PSI as part of the accreditation process to oversee consistency across HEIs.  Agree. This is a key aspect of the new five-year integrated degree. To make explicit this aspect, Standard 4.9 has been revised to read as follows: 'There must be a continuum of structured and quality-assured practice placement experiences throughout the curriculum from introductory to advanced, and across the main practice settings of community, hospital and industry, that are of adequate scope, intensity, structure and duration (...)'
33	Sally Devine	Agree <i>Re Standard 21./2.2/2.5</i> Yes <i>Re Standard 2.3</i> Head should be a registered pharmacist	Noted.  The PSI, through the accreditation process to assess compliance with these

		in Ireland	Standards, will ensure that the necessary leadership in the practice and profession of pharmacy is assured and that compliance with Standard 2.3 is met.
38	Paul Fahey	Agree  <i>Re Standard 2.4</i> This is critical to producing graduates that will be capable of working in a collaborative environment that will promote optimal patient outcomes  <i>Re Standard 2.5</i> Practice based placements must be part of the HEI's strategy if it is going to produce graduates that will respond to evolving healthcare system needs	Noted.  Noted. This is a key aspect of the new five-year integrated degree. To make explicit this aspect, Standard 4.9 has been revised to read as follows: 'There must be a continuum of structured and quality-assured practice placement experiences throughout the curriculum from introductory to advanced, and across the main practice settings of community, hospital and industry, that are of adequate scope, intensity, structure and duration (...)'
50	Prof Stephen Byrne, as an authorised representative of the School of Pharmacy UCC	Strongly Agree  <i>Re Standard 2.8</i> The competency assessment will be based on facilitator/tutor and staff feedback to the School and final decision will be based on the assessment conducted by facilitators	Noted. The manner by which each HEI achieves this Standard will be evaluated by the PSI through the accreditation process.
52	Nuala Doyle, as an authorised representative of the Hospital Pharmacist Association of Ireland	<i>Re Standard 2.3</i> I feel quite strongly the Head of the School of Pharmacy should be a Pharmacist, where there is none the authority must be absolute and cannot be overruled by the Head of the School in this premise	The PSI, through the accreditation process to assess compliance with these Standards, will ensure that the necessary leadership in the practice and profession of pharmacy is assured and that compliance with Standard 2.3 is met.
53	Prof Linda Hogan, as an authorised representative of the School of Pharmacy TCD	Agree  <i>Re Standard 2.2</i> This indicates a potential role for tutor pharmacists in raising concerns about the student's ability to practice.	Agreed.
54	Joan Peppard, as an authorised representative of the Hospital Pharmacist Association of Ireland	Neutral  <i>Re Standard 2.2</i> It is assumed that this sub-standard will be linked to the requirements of 2.5, 2.8, 3.3.1(d), 3.3.1(g), 3.2, 3.5, 3.6(c)  <i>Re Standard 2.4</i> It is not clear how a guidance document	Agreed. The PSI will reflect these linked requirements in the guidance for HEIs to accompany these Standards.  The PSI would hope to provide suitable clarity to the HEIs as to how to evidence compliance with this Standard.

		<p>can instruct the HEI in its activities and how such activity can be monitored and audited by the PSI</p> <p><i>Re Standard 2.5</i> It is unclear how these external arrangements will be supported and funded. Clear governance arrangements should be prepared and agreed by all parties. It is unclear if arrangements with non-affiliated healthcare teaching facilities will be acceptable. It will be necessary for the PSI to support the implementation phase of the Report on the Review of Hospital Pharmacy chaired by Dr. Ambrose McLoughlin and accepted by the DOHC and HSE in November 2011 to support practice placements in a structured manner in hospital based placements</p> <p><i>Re Standard 2.8</i> It is assumed that key issues will be defined in the guidance document to be developed. It is assumed that the existence of a record and the contribution of tutors to such a record will be advised to each tutor each and every time a student is assigned to a placement especially where a memorandum of understanding exists with the facility/group</p>	<p>Monitoring and auditing will be carried out through the accreditation process and statutory annual reporting.</p> <p>The PSI agrees that appropriate governance and funding arrangements must be in place for any HEI delivering the Programme. Under the revised Standard 4.9, non-affiliated healthcare teaching facilities can be accommodated as long as the Standards are met. Furthermore, Standard 2.5 has been amended to read as follows: 'The School should have access to, and arrangements with, HEI affiliated and other healthcare teaching facilities (...)'.  Agreed. The manner by which each HEI achieves this Standard will be evaluated by the PSI through the accreditation process.</p>
55	Anne Teresa Morgan, as an authorised representative of Boots Retail Ireland	<p><i>Re Standard 2.8</i> Guidance and reassurance needs to be provided, by the provider, of the implications for the tutor/practice placement establishment, if a fitness to practice issue arises within the first year of the student qualifying as a pharmacist. Would it subsequently be investigated if any fitness to practice issues were highlighted by the tutor in the final placement and if not why not?</p>	<p>Standard 2.8 requires fitness to practise matters to be dealt with in accordance with PSI Council policy (to be developed) or legislative provisions. The sign-off by a Head of School attesting to a student's fitness to be registered will be dealt with also in the revised statutory instrument to underpin the new qualification for practice.</p>
56	Anne Maria O'Connor, as an authorised representative of the Health and Safety Authority	<p><i>Re standard 2.2</i> Suggest that you include a reference in (b) that safety in this paragraph includes the safety of all that may be affected including students and employees and others in the learning environment and</p>	<p>Noted. This is an important aspect. However, the PSI considers a more appropriate location for this feature is under Standard 7.8(c) where the guidance for HEIs to accompany these Standards will require, <i>inter alia</i>,</p>

		workplace (as well as patients).	evidence of safety procedures being in place in the training establishments.
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**Do you agree that **Standard 3** provides for all personnel and other resource needs that are required to ensure the effective delivery of the five-year fully integrated Masters Degree Programme?**

No	Name	SUBMISSION	PSI RESPONSE
4	Anne Keane, as an authorised representative of the Medical Council	Agree  <i>Re Standard 3.4</i> More explicit ref could be made to technical staff being suitably qualified / trained	Agreed. Standard 3.4 has been revised to take account of this and now reads as follows: 'Technical staff should be suitably qualified and trained and proficient in the operation and maintenance of (...).'
6	Marie Richardson	Agree  <i>Re Standard 3.1</i> There should and must be a large representation from pharmacists who work in pharmacy on a day to day basis and are aware of and are in touch with the daily challenges faced by pharmacists.  <i>Re Standard 3.5</i> Tutors have to be aware that they have to spend time with and work alongside the student for min 75% of the students working week to ensure adequate supervision and to provide proper guidance to the student and afford then the best learning opportunity possible	Noted. The manner by which each HEI achieves this Standard will be evaluated by the PSI through the accreditation process.  The PSI would consider that the mechanisms to be put in place under Standard 7.8 should be sufficient to assure that there is proper guidance. The manner by which each HEI achieves Standard 7.8 will be evaluated by the PSI through the accreditation process.
24	MaryKate Shanahan	Agree  <i>Re Standard 3.2</i> Pharmacist tutors should attend revision courses and peer meetings to discuss learning capabilities/difficulties experienced by students  <i>Re Standard 3.6</i> Training establishments should all pay a minimum wage if full time employment expected.	Agreed. Standard 3.1(g) provides for Council of the PSI to define the policy for tutor pharmacist development. Furthermore, Standard 7.8 provides that there be processes to monitor, review and take necessary corrective action with students and the guidance for HEIs to accompany these Standards will incorporate this point.  Noted. However, as the new structure of the pharmacist qualification will change the dynamic from employer-employee to teacher-learner, the issue of an

			employment relationship will not arise.
33	Sally Devine	Agree  <i>Re Standard 3.1/3.3/3.5/3.6</i>  Yes	Noted.
38	Paul Fahey	Agree  <i>Re Standard 3.2</i> Practice educators are essential to producing graduates with an insight to their future workplace. The current practice of only having practice educators from multinational pharmacy chains is not sufficient. Practice educators should be from hospital, industry, regulatory and community pharmacy. Also, smaller independent community pharmacy educators should be appointed so as not to skew student insight to the business model of large pharmacy chains whose main business model may be health and beauty rather than healthcare based.	Noted. The manner by which each HEI achieves a balanced approach to resourcing of all staff, including teacher-practitioners and practice educators, will be evaluated by the PSI through the accreditation process.
50	Prof Stephen Byrne, as an authorised representative of the School of Pharmacy UCC	Strongly Agree  <i>Re Standard 3.1</i> It would be beneficial to the Schools if the PSI stipulated a student/staff ratio comparative to international standards. For example, ACPE ratio of 10:1 (students: staff)  <i>Re Standard 3.2</i> Could the PSI clarify the qualification / educational requirement of a Practice Educator? What is the ideal split in duties of such a person between education and practice in the opinion of the PSI?	Noted. The manner by which each HEI achieves this Standard will be evaluated by the PSI through the accreditation process.  The guidance to accompany these Standards may provide some clarity to address these questions.
51	Dr Tamasine Grimes	Neutral  <i>Re Standard 3.1</i> <i>“There must be an appropriate mix of academic staff practising as pharmacists in clinical practice including senior staff who can influence policy within the School”</i>	

		<p>I agree with this point. This might be further supported by inclusion of a bullet point to suggest this staff's involvement in curriculum design &amp; development; assessment design &amp; development; course management/ coordination activities.</p> <p>Point <i>3.1g</i> explicitly states that this applies to full-time and part-time staff. I suggest it may be supportive to suggest that all points within 3.1 (a to g) should apply to full-time and part-time staff.</p> <p><i>Re Standard 3.4</i> Suggest amend "laboratory practice sessions and projects" to "practice sessions and projects". This is important as not all practice related activities, which require support, are considered as "laboratory".</p> <p><i>Re Standard 3.5</i> Challenging to appreciate the organisational structure, responsibilities and accountabilities here. How will the formerly called "office of experiential learning" contribute here? With whom will responsibility for recruitment of tutor pharmacists lie? How will this work if and when a tutor receives students from more than one HEI. This is a reasonable expectation given that all HEI are expected to collaborate on practice placement.</p> <p><i>Re Standard 3.6</i> <i>3.6c</i> – Should there be a statement regarding joint working between the PSI and HEIs in the assessment of the suitability of training establishments/ tutors? The PSI may be in the knowledge of an establishment/ tutor being subject to a fitness to practice procedure, which could potentially jeopardise a training period for a student. Links to items 7.8a and 7.8c.</p>	<p>Agreed. Standard 3.1 has been amended to reflect this point and now reads as follows: '(...) including senior staff who can influence policy within the School and contribute to curriculum design and development, assessment design and development and course management and coordination activities.'</p> <p>Agreed. Standard 3.1 has been amended to explicitly reference both full-time and part-time staff. The last sentence under 3.1 now reads as: 'This staff, full-time and part-time, must:'</p> <p>Agreed. 'Practice sessions and projects' has been added to the activities to be prepared and delivered by technical staff.</p> <p>It will be a matter for each HEI to ensure compliance with this Standard, irrespective of whether they work within a shared services structure (i.e. the Office of Experiential Learning), as is promoted within these Standards, or individually. The manner by which each HEI achieves this Standard will be evaluated by the PSI through the accreditation process.</p> <p>This Standard makes reference to the need for each HEI to have in place policies and procedures that must meet any requirements that may be required by the PSI Council. The issues referenced here should be captured through the PSI Council policy process.</p>
53	Prof Linda Hogan, as an authorised	Disagree	

<p>representative of the School of Pharmacy TCD</p>	<p><b>Re Standard 3.1</b>  There are significant resource implications for the School in recruiting additional personnel.  It seems unnecessarily prescriptive to insist that senior academic staff within the school should be practising as pharmacists in the clinical environment. It is unlikely that the School will be in a position to change its staff complement in the current and prospective future economic environment.  The School/College should have the autonomy to decide on the academic staff requirements and duties.</p> <p><b>Re Standard 3.2</b>  Is it anticipated that these practice educators would be additional to the School’s full-time equivalent (FTE) Practice Educator in the Office of Experiential Learning (OEL)? There are significant resource implications for the School in recruiting such personnel.</p> <p><b>Re Standard 3.4</b>  Suggest amend “laboratory practice sessions and projects” to “practice sessions and projects”. This is important as not all practice related activities, which require support, are considered as “laboratory”.</p> <p><b>Re Standard 3.5</b>  It is challenging to appreciate the organisational structure, responsibilities and accountabilities here. How will the “Office of Experiential Learning” contribute here? With whom will responsibility for recruitment of tutor pharmacists lie? How will this work if and when a tutor receives students from more than one HEI. This is a reasonable expectation given that all HEI are expected to collaborate on practice placement.</p> <p><b>Re Standard 3.6</b>  <b>3.6a</b> - There are significant resource implications for the School.</p>	<p>Noted. However, there may be a number of ways in which this Standard may be met and the manner by which each HEI achieves this Standard will be evaluated by the PSI through the accreditation process. As this is a Professional Degree Programme, and in order to seek to address the practice-theory gap, the PSI believes that some teaching must be grounded in the realities of current pharmacy practice.</p> <p>As it will be a matter for each HEI to ensure compliance with this Standard, irrespective of whether they work within a shared services structure (i.e. the Office of Experiential Learning – OEL), the OEL has not been referenced specifically. The manner by which each HEI achieves this Standard will be evaluated by the PSI through the accreditation process.</p> <p>Agreed. ‘Practice sessions and projects’ has been added to the activities to be prepared and delivered by technical staff.</p> <p>It will be a matter for each HEI to ensure compliance with this Standard, irrespective of whether they work within a shared services structure (i.e. the Office of Experiential Learning), as is promoted within these Standards, or individually. The manner by which each HEI achieves this Standard will be evaluated by the PSI through the accreditation process.</p> <p>Noted. The manner by which each HEI achieves this Standard will be evaluated by the PSI through the accreditation process.</p>
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		<p><b>3.6c</b> – Consideration should be given to the inclusion of a statement regarding joint working between the PSI and HEIs in the assessment of the suitability of training establishments/ tutors. The PSI may be in the knowledge of an establishment/ tutor being subject to a fitness to practise procedure, which could potentially jeopardise a training period for a student. Links to items 7.8a and 7.8c.</p> <p><b>3.6d</b> – It seems unreasonable to have contingency plans in place to cover <b>any</b> deficiencies in infrastructure, equipment or personnel.</p>	<p>This Standard makes reference to the need for each HEI to have in place policies and procedures that must meet any requirements that may be required by the PSI Council. The issues referenced here should be captured through the PSI Council policy process.</p> <p>Agreed. Standard 3.6 has been revised and now reads as follows: ‘The School should have contingency plans in place to cover any deficiencies in infrastructure, equipment or personnel that may arise in order to ensure the effective delivery of the Professional Degree Programme.’</p>
54	Joan Peppard, as an authorised representative of the Hospital Pharmacist Association of Ireland	<p>Neutral</p> <p><b>Re Standard 3.1</b> It is assumed that the term "sufficient" will be further detailed in the guideline. It is assumed the term "teaching" will be defined in the guideline.</p> <p><b>3.1(e)</b> It is unclear how this will be measured/audited or how the PSI will be in a position to address perceived deficiencies within the HEI and its relationship with its university.</p> <p><b>3.1(g)</b> It is assumed that access to the organised professional development programme will be provided to teacher practitioners/tutors based in the healthcare teaching facilities. It is unclear where the financial responsibilities for such access will lie.</p> <p><b>Re Standard 3.2</b> It will be necessary to engage in the implementation on the Report on the Review of Hospital Pharmacy to ensure the appropriate development of such posts in a clear structure within hospitals/healthcare teaching facilities.</p>	<p>The manner by which each HEI achieves this Standard will be evaluated by the PSI through the accreditation process.</p> <p>The manner by which each HEI achieves this Standard will be evaluated by the PSI through the accreditation process.</p> <p>Yes. Standard 3.1 explicitly provides that all academic and other teaching staff must have access to an organised professional development programme.</p> <p>Noted. The manner by which each HEI achieves this Standard will be evaluated by the PSI through the accreditation process.</p>
55	Anne Teresa Morgan, as an authorised representative of	<p><b>Re Standard 3.5</b> While welcome that this accreditation standard is to ensure the consistency of</p>	

	<p>Boots Retail Ireland</p>	<p>tutors, some clarity would be required on the following points:</p> <p>a) Appropriately qualified – it would be important that any additional training required to act as a tutor is readily accessible to pharmacists and available throughout the year</p> <p>b) Professional role models - What are the implications of pending fitness to practice investigations against the establishment or individual pharmacist? Does this prevent them from being a tutor? And what is the implication for the student if this happens during their practice placement</p> <p>c) The role of the tutor in evaluating the student, the process for evaluation cannot be onerous for the tutor</p> <p>d) How does the provider intends to address the issue of poor tutor performance</p> <p><i>Re Standard 3.6</i> The requirements of the training establishments cannot be over and above the requirements set out by the retail business regulations, as this may be a hindrance for tutor to provide practice placement</p>	<p>Noted. This aspect will be evaluated by the PSI through the accreditation process with particular reference to Standard 7.8.</p> <p>These are matters which are currently the focus of PSI Council policy and which should be ultimately dealt with through the revised statutory instrument on education and training, which will be subject to a separate public consultation process.</p> <p>Noted. This will be monitored by the PSI through the accreditation process.</p> <p>Standard 7.8 addresses the appointment and development of tutors and the organisational support for the tutoring process. This will be monitored by the PSI through the accreditation process.</p> <p>The manner by which each HEI achieves this Standard will be evaluated by the PSI through the accreditation process. Furthermore, Standard 3.6 also makes reference to the development of Council policy in this regard with which the HEIs would be required to comply.</p>
<p>56</p>	<p>Anne Maria O'Connor, as an authorised representative of the Health and Safety Authority</p>	<p><i>Re Standard 3.6</i> Suggest that you include in (b) a reference to ensuring that the accommodation, facilities and equipment are safe to use and are properly maintained in a safe condition.</p>	<p>Agreed. Standard 3.6(b) has been amended to include a specific reference to this.</p>

Do you agree that **Standard 4** provides the necessary guidance to the professional degree programme provider in designing a curriculum that will deliver an integrated, interdisciplinary, and advanced learning experience that will enable students to attain the level of professionalism required for entry to professional practice?

No	Name	SUBMISSION	PSI RESPONSE
2	Ciara O'Mahony	<p>Agree</p> <p><i>Re Standard 4.4</i> Important to support not only those intending to enter clinical practice but also to facilitate those with a greater interest in academia - both "intellectual and clinical objectives", important.</p>	<p>Agreed. However, as the Register of Pharmacists is a generalist register, the HEI must be able to confirm that a graduate is fit to apply to have their names entered in the Register of Pharmacists, irrespective of future practice.</p>
4	Anne Keane, as an authorised representative of the Medical Council	<p>Agree</p> <p><i>Re Standard 4.8</i> There could be more clarity about the expectation for the research component given that this is a Masters level degree, though it is appreciated that ref is made to the NFQ definition. Ref to the desirability or otherwise of smaller research components in the programme - e.g. electives, student selected modules - might be helpful</p>	<p>Noted. The manner by which each HEI achieves this Standard and Standard 4 (Teaching and Learning Strategy) will be evaluated by the PSI through the accreditation process.</p>
33	Sally Devine	<p><i>Re Standard 4.3/4.4/4.5</i> Yes</p> <p><i>Re Standard 4.6</i> Students helping educate years below is definitely a good idea.</p>	<p>Agreed. This is also supported by the educational research evidence base.</p>
44	Bart Van Oyen	<p>Neutral</p> <p>The demands on the different Pharmacists in their work places requires diversification in education. Adding 1 year of education without differentiation to the requirements is of no advantage.</p>	<p>Noted. The new 5-year degree replaces the existing structure of the five year qualification but moving from a 4+1 structure to a fully integrated 5-year structure.</p>
51	Dr Tamasine Grimes	<p>Agree</p> <p><i>Re Standard 4.4</i> Suggest 4.4 should require the curriculum is kept abreast of advances arising from POLICY, research and development. This is important where</p>	<p>Agreed. Standard has been amended to reflect the addition of 'policy'.</p>

		national policy may not be aligned with international evidence.	
53	Prof Linda Hogan, as an authorised representative of the School of Pharmacy TCD	<p>Disagree</p> <p><i>Re Standard 4.4</i> We suggest that standard 4.4 should require the curriculum is kept abreast of advances arising from <b>policy</b>, research and development. This is important where national policy may not be aligned with international evidence.</p> <p>Generally, we object to the activities in the pharmaceutical sciences as being merely ‘foundation and support’ for the intellectual and clinical objectives of the professional programme as stated in 4.4. In the University context we see training in the pharmaceutical sciences as an end in itself not just support for ‘professional activity’.</p> <p><i>Re Standard 4.5</i> We would prefer it if this standard would include ‘drug discovery’ – from the current text of the standard it sounds as if this process begins with the ‘manufacture’. Medicinal and pharmaceutical chemistry still remain a pillar in European and US Schools of Pharmacy.</p>	<p>Agreed. Standard has been amended to reflect the addition of ‘policy’.</p> <p>Noted. However, as these Standards are for the purposes of a professional degree programme, the delivery of which is to enable the development of a safe and competent future pharmacist as they progress through the five years of education, training and assessment, it accepted and understood that a university-level degree must and should encompass objectives that go beyond the requirements of an accrediting body.</p> <p>Agreed. Standard 4.5 has been amended to include reference to ‘drug discovery’ and now reads as follows: ‘(...) an understanding of the key regulatory and scientific aspects of drug discovery and the manufacture, preparation, quality control, distribution, (...)’.</p>
56	Anne Maria O'Connor, as an authorised representative of the Health and Safety Authority	Suggest that you include a reference to students obtaining a satisfactory knowledge of occupational and environmental health and safety and the related legal requirements.	Agreed. This aspect forms part of the Indicative Syllabus that is set out in Appendix B of the Standards under ‘The Wider Context’. The ‘related legal requirements’ have been incorporated into the Syllabus.

Do you agree that **Standard 5** provides sufficient guidance to the professional degree programme provider in designing and implementing an effective Teaching and Learning Strategy that will ensure the integration of theory and practice as required by the Professional Degree Programme?

No	Name	SUBMISSION	PSI RESPONSE
33	Sally Devine	<p>Agree</p> <p><i>Re Standard 5.1</i> (d) and (g) are excellent and need to be taught. Teaching through Problem based learning I don't think is a good idea</p> <p><i>Re Standard 5.4</i> Professionalism should be a way of life the student develops from observing it in their pharmacy tutors lectures school etc. not simply acting a certain way so they are not in on a concerns comity. So while the procedures should obviously be there I would put more emphasis on leading by example.</p>	<p>Noted. Standard 5.1(f) makes reference to a need for a variety of teaching and learning approaches appropriate to stated learning outcomes.</p> <p>Agreed. Standard 5.4 has been revised to read as follows: 'The Teaching and Learning Strategy must develop a culture of professionalism in which all teaching staff can lead by example, collegiality, (...)'</p>
38	Paul Fahey	<p>Strongly Agree</p> <p>The CCF will be the core tool that will allow undergraduates and graduates achieve professional fulfilment and allow them to benchmark their practice against an accepted minimum norm</p>	<p>Agreed. That is one of the PSI's intended aspirations for the CCF.</p>
44	Bart Van Oyen	<p>Disagree</p> <p>Too general</p>	<p>Noted. It is anticipated that the guidelines for HEIs to accompany the Standards should clarify further the requirements.</p>
51	Dr Tamasine Grimes	<p>Agree</p> <p><i>Re Standard 5.1</i> <i>5.1d</i> – suggest clarify the term “year on year” – does this mean successive calendar years, or as the student progresses through the programme?</p>	<p>Agreed. Standard 5.1(d) has been revised to replace the term ‘year on year’ with the wording ‘as the student progresses through the Professional Degree Programme’.</p>
53	Prof Linda Hogan, as an authorised representative of the School of Pharmacy TCD	<p>Disagree</p> <p>There is an opportunity here for inclusion of a statement that indicates that the teaching strategy should also place emphasis upon the development of the necessary skill-set to allow the</p>	<p>Noted and agreed.</p>

		<p>graduate to take employment opportunities outside that of a patient facing role.</p> <p><i>Re Standard 5.1</i>  <b>5.1c</b> - There is a requirement to emphasise the contribution of the pharmacist in the healthcare team, but no mention of the need to emphasise the contribution of the pharmacist in industry and pharmacists in non-patient-facing roles. See also Standard 6.1 (Assessment Strategy). We feel this is a missed opportunity to cover the breadth of potential pharmacist roles.</p> <p><b>5.1d</b> - We suggest that the term “year on year” be clarified – does this mean successive calendar years, or as the student progresses through the programme?</p> <p><b>5.1f</b> - We suggest consideration of alternative wording for “<i>Approaches should include a combination of didactic, experiential and direct observational activities</i>” – e.g. this does not include the likes of group constructivism. Perhaps didactic and non-didactic would suffice?</p> <p><i>Re Standard 5.3</i>  It seems unnecessarily prescriptive to insist that ‘<i>...pharmacy law, ethics, professionalism and pharmacy practice are taught predominantly by pharmacists with appropriate contemporary experience of practice...</i>’  The decisions as to who are the best people to teach various components of the course should rest with the School.</p>	<p>Standard 5.1(c) has been revised to read as follows: ‘emphasise the contribution of the pharmacist in the pharmaceutical industry and the pharmacist in the healthcare team, including (...)’.</p> <p>Agreed. Standard 5.1(d) has been revised to replace the term ‘year on year’ with the wording ‘as the student progresses through the Professional Degree Programme’.</p> <p>Agreed. The term ‘non-didactic’ has been incorporated into the list of teaching approaches in Standard 5.1(f).</p> <p>Noted. However, as these Standards are for the purposes of a professional degree programme, the PSI considers it essential that it is registered pharmacists with appropriate contemporary pharmacy practice who would lead in the important areas of law, ethics, professionalism and practice.</p>
54	Joan Peppard, as an authorised representative of the Hospital Pharmacist Association of Ireland	<p>Neutral</p> <p><i>Re Standard 5.1</i>  <b>5.1 (d)</b> Please see comment in section 3.1 (g), 3.2 and 3.6 (c). 5.1 (e) as for 5.1 (d)</p> <p><i>Re Standard 5.3</i>  It is assumed that further definition of "contemporary" will be provided in the</p>	<p>Noted. See response to points in relation to Standards 3.1(g) and 3.2 above.</p> <p>The manner by which each HEI achieves this Standard will be evaluated by the PSI through the accreditation process.</p>

		<p>guidelines.  <i>Re Standard 5.4</i>  See comment section in 2.8</p>	<p>Noted. See response above in relation to Standard 2.8.</p>
55	<p>Anne Teresa Morgan,  as an authorised  representative of  Boots Retail Ireland</p>	<p><i>Re Standard 5.1</i>  (f) We welcome the requirement that the curriculum should correspond to requirements for future practice. Graduates should be able to deliver all services upon registration e.g. vaccination services. Welcome the teaching of students to develop the skills above in point (i) and (j), but it would also be important to include development of decision making skills and the impact of their decisions on patient safety and leadership skills</p>	<p>Noted and agreed. In the matter of enhanced or expanded services, legislation may in some respects dictate who can deliver such services. With respect to 5.1(i), this Standard has been amended to incorporate the suggested areas of leadership and impact of decision-making and now reads as follows: ‘place emphasis on the development of leadership skills, problem-solving skills and the justification of decisions made both on an individual and team-based basis and the impact of such decisions on patient safety;’.</p>

Do you agree that **Standard 6** provides sufficient guidance to the professional degree programme provider in designing an effective Assessment Strategy that will result in the effective assessment of a student's competence and fitness to discharge the responsibilities of a registered pharmacist and that leads to the award of a Masters Degree that is both academic and professional in nature?

No	Name	SUBMISSION	PSI RESPONSE
4	Anne Keane, as an authorised representative of the Medical Council	Agree  <i>Re Standard 6.1</i> There is ref to externs in draft standard 7 but it may be that this refers to externs being involved in quality assurance activity. It could be useful to mention in standard 6 the need for external scrutiny of assessments applied to students.	Noted and agreed. Standard 6.3 has been revised to read as follows: 'There must be rigorous processes for review, monitoring and evaluation of all elements of the assessment strategy that identify and take account of inconsistencies and so ensure fairness and reliability. Such processes should incorporate external scrutiny of student assessments.'
24	MaryKate Shanahan	Strongly Agree  If tutor pharmacist deem student to have reached all competencies expected this should be included in final assessment strategy as full time supervision and observation of students in practice is a more accurate reflection of their abilities than individual academic marks	Agreed. Standard 6.1(a) has been revised to take account of this comment and now reads as follows: '(...) appropriate to assess the progressive attainment of all competencies set out in the CCD and the process of professionalisation and should include a formal assessment of the student at the end of year five by the tutor pharmacist;'
53	Prof Linda Hogan, as an authorised representative of the School of Pharmacy TCD	Agree  <i>Re Standard 6.1 6.1f</i> - There is a requirement to emphasise the contribution of the pharmacist in the healthcare team, but no mention of the need to emphasise the contribution of the pharmacist in industry and pharmacists in non-patient-facing roles. See also Standard 5.1 (Teaching and Learning Strategy)	Agreed. Standard 6.1(f) has been revised to read as follows: 'emphasise the contribution of the pharmacist in the healthcare team and the pharmacist in the pharmaceutical industry and where appropriate (...)'
54	Joan Peppard, as an authorised representative of the Hospital Pharmacist Association of Ireland	Neutral  <i>Re Standard 6.1 6.1(d)</i> It is assumed that all practice placements will have clear guidance for tutors with and explanation of the accountability for and consequences of each mark awarded for practice placements.	Agreed. The guidelines for HEIs to accompany these Standards will provide clear guidance to HEIs with regard to evidence of compliance with this standard.

		<p><i>6.1(i)</i> It is not clear what benefit a formal examination of pharmacy law at one point in the pharmacy career contributes to the practice of pharmacy</p> <p><i>Re Standard 6.3</i> A formal mechanism for individual tutors to identify inconsistencies in the assessment process should be identified</p>	<p>The PSI considers it essential that graduates are assessed in pharmacy law towards the end of the Professional Degree Programme as this ensures that they are commencing independent professional practice with current knowledge of the law and its application to pharmacy practice. Such graduates should also be equipped with lifelong learning skills that will enable them to remain current in this area throughout their careers (see Domain 1 of the CCF).</p> <p>Noted. Standard 7.3 makes specific reference to the need to consider the views and experiences of a range of stakeholders that includes an explicit reference to tutor pharmacists. Also, the guidelines for HEIs to accompany these Standards will provide further clarity in this regard.</p>
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Do you agree that **Standard 7** provides sufficient guidance to ensure that the professional degree programme provider devises and maintains a system of quality management that serves to maximise and enhance the performance of the five-year fully integrated Masters Degree Programme?

No	Name	SUBMISSION	PSI RESPONSE
24	MaryKate Shanahan	<p>Agree</p> <p><i>Re Standard 7.1</i> This information should be available as early as possible-in university guide books.</p> <p><i>Re Standard 7.5</i> Tutor approval would be consistent and sustained</p>	<p>Noted and agreed. This information will be documented as a specific requirement to evidence compliance with Standard 8 in the guidelines for HEIs to accompany these Standards.</p> <p>Noted and agreed. The need to ensure consistency across all tutors and their assessments will be an important feature of this degree programme. Evidence of compliance by the HEIs with Standard 7.5 will be evaluated by the PSI through the accreditation process.</p>
50	Prof Stephen Byrne, as an authorised representative of the School of Pharmacy UCC	<p>Agree</p> <p><i>Re Standard 7.4</i> The SOP would like clarification regarding what the PSI would deem to be a key performance indicator? Could they please detail some examples</p>	<p>The PSI will incorporate the types of evidence to be provided to illustrate compliance with this Standard as part of the guidelines for HEIs to accompany these Standards.</p>
51	Dr Tamasine Grimes	<p>Agree</p> <p><i>Re Standard 7.3</i> Suggest “staff” should be clarified to “full-time and part-time staff”.</p>	<p>Agreed. Both references to ‘staff’ in Standard 7.3 are now followed by the term ‘full and part-time’ in parentheses.</p>
54	Joan Peppard, as an authorised representative of the Hospital Pharmacist Association of Ireland	<p>Neutral</p> <p><i>Re Standard 7.1</i> The structure may need to address the requirement for accountability to the individual tutor level even where a memorandum of understanding exists</p> <p><i>Re Standard 7.3</i> The provider may need to include inspection of practice place locations as part of the evaluation. This should be included in the memorandum of understanding.</p>	<p>Noted. The PSI will incorporate the types of evidence to be provided to illustrate compliance with this Standard as part of the guidelines for HEIs to accompany these Standards.</p> <p>Noted and agreed. Standard 3.6 explicitly requires that there be policies and procedures in place to ensure the appropriateness of training establishments and Standard 7.8 requires that there be appropriate mechanisms to assurance and enhance</p>

		<p><i>Re Standard 7.4</i> The further definition of the KPI's should be included in the guidelines</p> <p><i>Re Standard 7.5</i> Consistency in the evaluation of proficiency at practice level will be supported by access to on-going education as outlined in 3.1 (g)</p> <p><i>Re Standard 7.7</i> It is assumed that timelines will be established in the supporting guidelines</p> <p><i>Re Standard 7.8</i> See also 7.3. It is assumed that individual tutors will be required to individually consent to engagement as tutors irrespective of an employer's engagement with the memorandum of understanding. It is assumed that the guidelines will provide additional information on the KPI's required to establish the appropriateness. There is a requirement for engagement at national level on the Report of the Review of Hospital Pharmacy to ensure the allocation of protected time (wte) to facilitate student learning and review in practice placements</p>	<p>the quality of all practice placements. Evidence of compliance by the HEIs with these aspects of the Standards will be evaluated by the PSI through the accreditation process.</p> <p>Agreed. The PSI will incorporate the types of evidence to be provided to illustrate compliance with this Standard as part of the guidelines for HEIs to accompany these Standards.</p> <p>Noted and agreed. The need to ensure consistency across all tutors and their assessments will be an important feature of this degree programme. Evidence of compliance by the HEIs with Standards 3.1(g) and 7.5 will be evaluated by the PSI through the accreditation process.</p> <p>Noted. The timeliness of such approvals will be in line with published dates of meetings of Council Advisory Committees and Council.</p> <p>Noted. The PSI will incorporate the types of evidence to be provided to illustrate compliance with this Standard as part of the guidelines for HEIs to accompany these Standards. Evidence of compliance by the HEIs with these aspects of the Standards will be evaluated by the PSI through the accreditation process.</p>
55	Anne Teresa Morgan, as an authorised representative of Boots Retail Ireland	<p><i>Re Standard 7.8</i> With respect to points <i>7.8 (a)</i> to <i>7.8 (d)</i> welcome them on the condition that they are not so onerous that inhibit tutors/ practice establishment owners taking part.</p>	<p>Noted. The PSI will incorporate the types of evidence to be provided to illustrate compliance with this Standard as part of the guidelines for HEIs to accompany these Standards with the intention of encouraging those tutors/practice establishment owners to participate</p>

		<p>Point 7.8 (e) requires clarity from provider that the tutor/establishment owner will have an input into the selection of the student for their establishment. The collaboration between the school and other schools of pharmacy in the state must cover guidelines of what should be covered in each practice placement; so from a tutor's perspective, they can accommodate students from all schools of pharmacy, without having to become familiar with different requirements/ syllabus from each school of pharmacy</p>	<p>while assuring quality.</p> <p>Noted and agreed. The Guidelines to accompany these Standards will provide clarity to HEIs as to the appropriate levels of collaboration that the PSI would expect to see in place.</p>
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Do you agree that **Standard 8** provides sufficient guidance to the professional degree programme provider to ensure that appropriate assistance and support mechanisms are made available to students prior to entry and throughout the course of the five-year Professional Degree Programme?

No	Name	SUBMISSION	PSI RESPONSE
2	Ciara O'Mahony	<p>Agree</p> <p><i>Re Standard 8.2</i></p> <p>In addition to point (g) students should be encouraged and facilitated to participate in extra-curricular activities, travel and/or volunteer work/paid work in an area not directly related to pharmacy. If all the students are familiar with is pharmacy, other pharmacy students, healthcare professionals etc. this may hinder their ability to understand patients in the future who will come from a wide variety of different (socio-economic) backgrounds. Point (h) of some importance. In addition, students, if possible, should be facilitated in spending a part of the degree course abroad, both for personal growth/development and to gain an insight into pharmacy practice around the world.</p>	<p>Noted and agreed. Standard 8.2 has been amended and a new section added which reads as follows: 'development of support structures that encourage active engagement in extra-curricular activities, travel and/or volunteer work/paid work so as to enhance personal growth and development and to increase awareness and understanding of varied socio-economic and cultural factors as determinants of health and well-being;'</p> <p>Standard 8.1(b) provides for policies on transfer credit and course waivers to be stated clearly and Standard 8.2(c) provides that students be supported in securing the maintaining placements for the practice-elements of the Professional Degree Programme. Evidence of compliance by the HEIs with these aspects of the Standards will be evaluated by the PSI through the accreditation process.</p>
4	Anne Keane, as an authorised representative of the Medical Council	<p>Agree</p> <p><i>Re Standard 8.2</i></p> <p>There could be ref made to the need to review intake against capacity and resources and adjust accordingly if necessary.</p>	<p>Agreed. This point is captured in Standard 3.6(b) where the School must ensure that it has sufficient resources available to it for the effective delivery and assessment of the degree programme to the numbers of students in each year of the programme.</p>
33	Sally Devine	<p>Agree</p> <p><i>Re Standard 8.1/8.2</i></p> <p>Yes</p>	<p>Noted.</p>
51	Dr Tamasine Grimes	<p>Agree</p> <p><i>Re Standard 8.2</i></p> <p><i>8.2h</i> – suggest this is an important point and should not be restricted to</p>	<p>Agreed. Standard 8.2 has been amended to now read as follows: 'encouragement of active engagement with relevant</p>

		<p><i>“pharmaceutical students’ representative associations”</i> – there may be important learning and development associated with participation in groups/committees external to Pharmacy.</p>	<p>pharmaceutical students’ representative associations at HEI, national and international levels, and other groups and committees which may be external to pharmacy, in order to develop individual professional and leadership qualities and foster pharmaceutical and other links at all levels;’</p>
53	<p>Prof Linda Hogan, as an authorised representative of the School of Pharmacy TCD</p>	<p>Strongly Agree</p> <p><i>Re Standard 8.2 8.2h</i> - We would suggest this is an important point and should not be restricted to <i>“pharmaceutical students’ representative associations”</i> – there may be important learning and development associated with participation in fora external to Pharmacy.</p>	<p>Agreed. Standard 8.2 has been amended to now read as follows: ‘encouragement of active engagement with relevant pharmaceutical students’ representative associations at HEI, national and international levels, and other groups and committees which may be external to pharmacy, in order to develop individual professional and leadership qualities and foster pharmaceutical and other links at all levels;’</p>
54	<p>Joan Peppard, as an authorised representative of the Hospital Pharmacist Association of Ireland</p>	<p>Neutral</p> <p><i>Re Standard 8.1 8.1 (g)</i> This requirement may be in conflict with <i>8.1 (a)</i> as this requirement may disadvantage students from a lower socio-economic background</p> <p><i>Re Standard 8.2 8.2 (c)</i> It is unclear where the final accountability will lie in the face of extreme difficulty in placing a student.</p>	<p>Noted [however, assumed that comment is in relation to 8.2(g)]. Evidence of compliance by the HEIs with these aspects of the Standards and their impact will be evaluated by the PSI through the accreditation process.</p> <p>Noted. Standard 8.2 provides that the HEI must have support mechanisms in place for students to secure and maintain placements for them. The Guidelines for HEIs to accompany these Standards will clarify this responsibility of the HEI.</p>
55	<p>Anne Teresa Morgan, as an authorised representative of Boots Retail Ireland</p>	<p><i>Re Standard 8.1</i></p> <p>As the current CAO application process does not involve universities interviewing students; the provider should have an admissions policy that will assess if perspective students have the right people skills and behaviours to be a pharmacist. Perhaps a system as adapted by the medical profession</p>	<p>Noted. Standard 8.1(b) provides for entry requirements to take account of a number of matters, including any requirements as approved by the PSI Council from time to time. At this juncture, there are no such requirements set out by the PSI Council.</p>

Do you agree that **Appendix B: Indicative Syllabus** complements the Core Competency Framework for Pharmacists and provides sufficient non-prescriptive guidance to the Professional Degree Programme Provider to design and implement a patient-centred syllabus that will meet the requirements of the five-year fully integrated Masters Degree Programme?

No	Name	SUBMISSION	PSI RESPONSE
4	Anne Keane, as an authorised representative of the Medical Council	Agree  This ref clarifies any concerns I might have re overly prescriptive standards. The patient - centred approach and benchmarking against international standards is commendable.	Noted.
50	Prof Stephen Byrne, as an authorised representative of the School of Pharmacy UCC	Strongly Agree  The focus upon patient-centred training is to be welcomed but will place significant pressure upon the Clinical Pharmacy staff within the SOPs.	Noted. However, the PSI would expect all teaching staff to contribute to patient-centred training.

Do you agree that **Appendix B.1 Indicative Syllabus - The Patient** provides sufficient guidance to the professional degree programme provider in designing and implementing a syllabus that meets patient needs and that will enable graduates to respond to those needs in a professional and ethical manner?

No	Name	SUBMISSION	PSI RESPONSE
NO COMMENTS			

Do you agree that **Appendix B.2 Indicative Syllabus - Health Care Systems and the Roles of Professionals** provides sufficient guidance to the professional degree programme provider in designing and implementing a syllabus that will enable graduates to attain and demonstrate the levels of professionalism and skills required to work as effective, efficient and confident pharmacists within the Irish health care system?

No	Name	SUBMISSION	PSI RESPONSE
6	Marie Richardson	Agree  The emphasis on multi-professionalism, with each profession playing their appropriate part, is welcomed  <i>Re item (iii)</i> Preparing graduates for lifelong learning, equipping them with the tools for that, is	Noted. These are both important aspects of the new five-year degree structure.

		a key part of the programme in a fast-moving environment like that of pharmacy.	
51	Dr Tamasine Grimes	<p>Agree</p> <p><i>Re item (iv)</i> Suggest “managing and learning from errors” should be broader to include more aspects of safety science, e.g. organization and safety culture, implementation science.</p> <p><i>Re item (v)</i> Suggest there needs to be inclusion in the programme of knowledge regarding translation of evidence into policy and into practice</p>	<p>Agreed. New Section 2 (v), last sentence has been revised to read as follows: ‘Safety science, including organisation and safety culture, implementation science, managing and learning from error.’</p> <p>Agreed. New Section 2(vi) added to read as follows: ‘Evidence-based policy and practice: use of evidence-based knowledge to develop policy and translate into practice.’</p>
53	Prof Linda Hogan, as an authorised representative of the School of Pharmacy TCD	<p>Agree</p> <p><i>Re item (iv)</i> We suggest that “managing and learning from errors” should be more broad to engage more aspects of safety science, e.g. inclusive or organization and safety culture, implementation science.</p> <p><i>Re item (v)</i> We suggest there needs to be inclusion in the programme of knowledge regarding translation of evidence into policy and into practice.</p>	<p>Agreed. New Section 2 (v), last sentence has been revised to read as follows: ‘Safety science, including organisation and safety culture, implementation science, managing and learning from error.’</p> <p>Agreed. New Section 2(vi) added to read as follows: ‘Evidence-based policy and practice: use of evidence-based knowledge to develop policy and translate into practice.’</p>

**Do you agree that [Appendix B.3 Indicative Syllabus – The Wider Context](#) provides sufficient guidance to the professional degree programme provider in designing and implementing a syllabus that provides graduates with a well-informed view and understanding of how pharmacy fits and operates within the political, legal, social, economic, and scientific sphere?**

No	Name	SUBMISSION	PSI RESPONSE
50	Prof Stephen Byrne, as an authorised representative of the School of Pharmacy UCC	<p>Agree</p> <p><i>Re item (ii)</i> The role of public health and health promotion in pharmacy practice could be emphasised more in the indicative syllabus</p>	<p>Noted and agreed. Section 3(ii) now reads as follows: ‘The role of public health and health promotion: public health promotion policy and</p>

			development and economics, particularly pharmacoeconomics. Role of pharmacy in public health and health promotion.'
51	Dr Tamasine Grimes	Agree  <i>Re item (ii)</i> Suggest need to include policy development.  <i>Re item (iii)</i> Suggest need to include translation of evidence into policy and practice.	Noted and agreed. Section 3(ii) now reads as follows: 'The role of public health and health promotion: public health promotion policy and development and economics, particularly pharmacoeconomics. Role of pharmacy in public health and health promotion.'  Agreed. Section 3(iii) has been expanded to include 'translation of evidence into policy and practice.'
53	Prof Linda Hogan, as an authorised representative of the School of Pharmacy TCD	Agree  <i>Re item (ii)</i> We suggest the need to include policy development.  <i>Re item (iii)</i> We suggest the need to include translation of evidence into policy and practice.	Noted and agreed. Section 3(ii) now reads as follows: 'The role of public health and health promotion: public health promotion policy and development and economics, particularly pharmacoeconomics. Role of pharmacy in public health and health promotion.'  Agreed. Section 3(iii) has been expanded to include 'translation of evidence into policy and practice.'

Do you agree that **Appendix B.4 Indicative Syllabus - Human and Veterinary Medicines: Drug Action** provides sufficient guidance to the professional degree programme provider in designing and implementing a syllabus that will enable students to demonstrate their knowledge and expertise on the application and behaviour of drugs, and the need to continually evaluate the performance of new and existing drugs.

No	Name	SUBMISSION	PSI RESPONSE
24	MaryKate Shanahan	Strongly Agree  Large emphasis at undergrad and post grad training should be on pharmacology	Agreed.

Do you agree that **Appendix B.5 Indicative Syllabus - Human and Veterinary Medicines: The Drug Substance** provides sufficient guidance to the professional degree programme provider in designing and implementing a syllabus that will provide graduates with an appreciation and understanding of the sources, properties and components of drugs, drug design and discovery?

No	Name	SUBMISSION	PSI RESPONSE
NO COMMENTS			

Do you agree that **Appendix B.6 Indicative Syllabus - Human and Veterinary Medicines: The Medicinal Product** provides sufficient guidance to the professional degree programme provider in designing and implementing a syllabus that will provide graduates with a thorough grounding in the formulation and compounding of medicines?

No	Name	SUBMISSION	PSI RESPONSE
51	Dr Tamasine Grimes	<p>Agree</p> <p><i>Re item (i)</i> Suggest this needs to be broader than sale and supply – the pharmacist’s role now also includes administration, monitoring and one might reasonably expect it could include prescribing in the future.</p>	<p>Agreed. Section 6(i) has been amended to read as follows: ‘Sale, supply, administration and monitoring of medicines, including (...)’</p> <p>The role of the pharmacist as a prescriber would need to be covered in the future if the legislation in this regard was to change.</p>
53	Prof Linda Hogan, as an authorised representative of the School of Pharmacy TCD	<p>Agree</p> <p><i>Re item (i)</i> We would suggest this now needs to be broader than sale and supply – the pharmacist’s role now also includes administration, monitoring and one might reasonably expect it could include prescribing in the future.</p>	<p>Agreed. Section 3(iii) has been expanded to include ‘translation of evidence into policy and practice.’</p> <p>The role of the pharmacist as a prescriber would need to be covered in the future if the legislation in this regard was to change.</p>

**General Comments regarding the Accreditation for the Five-Year Fully Integrated Masters Degree Programme in Pharmacy**

No.	Name	SUBMISSION	PSI RESPONSE
57	Jennifer Gygax, as an authorised representative of the HEA	<p>We have noted the correspondence issued on 30 September 2013. We wish to comment on the general issue of the eligibility of students to free fees.</p> <p>The Free Fees Initiative enables all qualifying students the opportunity to pursue one undergraduate qualification subject to a maximum Level 8 qualification. The FFI does not extend to postgraduate programmes.</p> <p>In this regard, in relation to other developments in the sector, the Department of Education and Skills requested the HEA to advise all institutions in April 2011 that should the final two years of any undergraduate programmes be upgraded to a Level 9, then these two years will no longer qualify for free tuition fees.</p>	<p>Noted. The pharmacist qualification has been a five-year qualification since the mid-1980s. It is not anticipated that the restructuring to a five-year fully integrated Masters degree programme will impact on the students' ability to avail of free fees for the first four years of the Programme.</p>